{x quif ReasonForRefund = 0}

**Cancelation of Coverage:**

{stdlongdate} Member ID: {stdMbrPERSLinkID}

{stdMbrFullName}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity} {stdMbrAdrCorState} {stdMbrAdrCorZip}

**RE:** **{MultiplePlanName} Refund(s)**

Dear {stdMbrSalutation}:

Per your request, coverage was canceled effective {qu EffectiveDate}. Due to the timing of receiving this cancelation request, we weren’t able to stop this deduction from being withheld from your {qu PaymentMethod}. Therefore, enclosed is check number {CheckNumberDollar} to refund the premium(s) withheld in error.

Please cash this check(s) at your earliest convenience.

If you have any questions, please call NDPERS at {stdNDPERSPhoneNumber} or {stdNDPERSTollFreePhoneNumber}.

Sincerely,

NDPERS Accounting Division

Enclosure: Refund Check(s)

{x endif}

{x quif ReasonForRefund = 1}

**Deceased:**

{stdlongdate} Member ID: {stdMbrPERSLinkID}

ESTATE OF {stdMbrFullName}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity} {stdMbrAdrCorState} {stdMbrAdrCorZip}

**RE:** **{MultiplePlanName} Refund(s)**

Dear Estate of {stdMbrSalutation}:

Due to the timing of when we were notified of their death, we weren’t able to stop this deduction from being withheld from their {qu PaymentMethod}. Therefore, enclosed is check number {CheckNumberDollar} to refund the premium(s) withheld in error.

Please cash this check(s) at your earliest convenience.

If you have any questions, please call NDPERS at {stdNDPERSPhoneNumber} or {stdNDPERSTollFreePhoneNumber}.

Sincerely,

NDPERS Accounting Division

Enclosure: Refund Check(s)

{x endif}

{x quif ReasonForRefund = 2}

**Enrolled in another Medicare D Plan:**

{stdlongdate} Member ID: {stdMbrPERSLinkID}

{stdMbrFullName}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity} {stdMbrAdrCorState} {stdMbrAdrCorZip}

**RE:** **{MultiplePlanName} Refund(s)**

Dear {stdMbrSalutation}:

Your Health and Medicare Part D plan were canceled effective {qu EffectiveDate} because you enrolled in another Medicare Part D plan. According to Federal Regulations, you cannot be enrolled in two prescription drug Medicare Part D plans. Your Health and Medicare Part D are a bundled product; therefore, both plans were canceled. We had already deducted your premiums from your {qu PaymentMethod}. Therefore, enclosed is check number {CheckNumberDollar} to refund the premium(s) withheld in error.

Please cash this check(s) at your earliest convenience.

If you have any questions, please call NDPERS at {stdNDPERSPhoneNumber} or {stdNDPERSTollFreePhoneNumber}.

Sincerely,

NDPERS Accounting Division

Enclosure: Refund Check(s)

{x endif}

{x quif ReasonForRefund = 3}

**Payment received twice:**

{stdlongdate} Member ID: {stdMbrPERSLinkID}

{stdMbrFullName}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity} {stdMbrAdrCorState} {stdMbrAdrCorZip}

**RE:** **{MultiplePlanName} Refund(s)**

Dear {stdMbrSalutation}:

We received and processed your personal check and the premiums were also deducted from your {qu PaymentMethod}. Therefore, enclosed is check number {CheckNumberDollar} to refund the premium(s) withheld in error.

Please cash this check(s) at your earliest convenience.

If you have any questions, please call NDPERS at {stdNDPERSPhoneNumber} or {stdNDPERSTollFreePhoneNumber}.

Sincerely,

NDPERS Accounting Division

Enclosure: Refund Check(s)

{x endif}

{x quif ReasonForRefund = 4}

**LEP Not Paid and Insurance Canceled:**

{stdlongdate} Member ID: {stdMbrPERSLinkID}

{stdMbrFullName}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity} {stdMbrAdrCorState} {stdMbrAdrCorZip}

**RE:** **{MultiplePlanName} Refund(s)**

Dear {stdMbrSalutation}:

Your Health and Medicare Part D plan were canceled effective {qu EffectiveDate} because NDPERS was notified by Humana, the Late Enrollment Penalty wasn’t paid. Your Health and Medicare Part D are a bundled product; therefore, both plans were canceled. We had already deducted your premiums from your {qu PaymentMethod}. Therefore, enclosed is check number {CheckNumberDollar} to refund the premium(s) withheld in error.

Please cash this check(s) at your earliest convenience.

If you have any questions, please call NDPERS at {stdNDPERSPhoneNumber} or {stdNDPERSTollFreePhoneNumber}.

Sincerely,

NDPERS Accounting Division

Enclosure: Refund Check(s)

{x endif}

{x quif ReasonForRefund = 5}

**PERS Enrollment Error:**

{stdlongdate} Member ID: {stdMbrPERSLinkID}

{stdMbrFullName}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity} {stdMbrAdrCorState} {stdMbrAdrCorZip}

**RE:** **{MultiplePlanName} Refund(s)**

Dear {stdMbrSalutation}:

Due to an enrollment error on our end, the incorrect premium of {qu OldRate} was deducted from your {qu PaymentMethod} from {qu FromDateRange} to {qu ToDateRange}. Therefore, enclosed is check number {CheckNumberDollar} to refund the premium(s) withheld in error. The correct premium of {qu NewRate} will be withheld from your {qu PaymentMethod} going forward.

Please cash this check(s) at your earliest convenience.

If you have any questions, please call NDPERS at {stdNDPERSPhoneNumber} or {stdNDPERSTollFreePhoneNumber}.

Sincerely,

NDPERS Accounting Division

Enclosure: Refund Check(s)

{x endif}

{x quif ReasonForRefund = 6}

**LIS Change:**

{stdlongdate} Member ID: {stdMbrPERSLinkID}

{stdMbrFullName}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity} {stdMbrAdrCorState} {stdMbrAdrCorZip}

**RE:** **{MultiplePlanName} Refund(s)**

Dear {stdMbrSalutation}:

We were notified by CMS (Center for Medicare Services) you qualified for a Low Income Subsidy rate effective {qu EffectiveDate}. This credit reduced your Medicare Part D premium from {qu OldRate} to {qu NewRate}. We are refunding the difference in premiums of {qu DifferenceInRates} from {qu FromDateRange} to {qu ToDateRange}. Therefore, enclosed is check number {CheckNumberDollar} to refund the premium(s) withheld in error. Your Medicare Part D premium will be {qu NewRate} per month.

Please cash this check(s) at your earliest convenience.

If you have any questions, please call NDPERS at {stdNDPERSPhoneNumber} or {stdNDPERSTollFreePhoneNumber}.

Sincerely,

NDPERS Accounting Division

Enclosure: Refund Check(s)

{x endif}

{x quif ReasonForRefund = 7}

**LEP Ended:**

{stdlongdate} Member ID: {stdMbrPERSLinkID}

{stdMbrFullName}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity} {stdMbrAdrCorState} {stdMbrAdrCorZip}

**RE:** **{MultiplePlanName} Refund(s)**

Dear {stdMbrSalutation}:

We were notified by CMS (Center for Medicare Services) the Late Enrollment Penalty was removed effective {qu EffectiveDate}. We are refunding the difference in premiums of {qu DifferenceInRates} from {qu FromDateRange} to {qu ToDateRange}. Therefore, enclosed is check number {CheckNumberDollar} to refund the premium(s) withheld in error. Your Medicare Part D premium will be {qu NewRate} per month.

Please cash this check(s) at your earliest convenience.

If you have any questions, please call NDPERS at {stdNDPERSPhoneNumber} or {stdNDPERSTollFreePhoneNumber}.

Sincerely,

NDPERS Accounting Division

Enclosure: Refund Check(s)

{x endif}

{x quif ReasonForRefund = 8}

**Change in Coverage - Spouse Passed:**

{stdlongdate} Member ID: {stdMbrPERSLinkID}

{stdMbrFullName}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity} {stdMbrAdrCorState} {stdMbrAdrCorZip}

**RE:** **{MultiplePlanName} Refund(s)**

Dear {stdMbrSalutation}:

We were notified your spouse passed away on {qu EffectiveDate}. Due to the timing and notification of this death, we were unable to change the amount of the deduction from your {qu PaymentMethod} to the single premiums.

We are refunding you the difference in premiums from Individual/Spouse to Single for the following insurance plans:

|  |  |  |  |
| --- | --- | --- | --- |
| **Plan:** | **Old Premium:** | **New Premium:** | **Difference in Premiums:** |
| {tb PlanValues} |  |  |  |

{x quif SpouseMedicare = Y}

We are also refunding your spouse’s Medicare Part D premium.{endif} Therefore, enclosed is check number {CheckNumberDollar} to refund the premium(s) withheld in error.

Please cash this check(s) at your earliest convenience.

If you have any questions, please call NDPERS at {stdNDPERSPhoneNumber} or {stdNDPERSTollFreePhoneNumber}.

Sincerely,

NDPERS Accounting Division

Enclosure: Refund Check(s)

{x endif}

{x quif ReasonForRefund = 9}

**Change in Coverage – Member’s Request:**

{stdlongdate} Member ID: {stdMbrPERSLinkID}

{stdMbrFullName}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity} {stdMbrAdrCorState} {stdMbrAdrCorZip}

**RE:** **{MultiplePlanName} Refund(s)**

Dear {stdMbrSalutation}:

We received your request to change your coverage. Due to the timing of receiving this request, we were unable to change the amount of the deduction from your {qu PaymentMethod} to the single premiums.

We are refunding you the difference in premiums from Individual/Spouse to Single for the following insurance plans:

|  |  |  |  |
| --- | --- | --- | --- |
| **Plan:** | **Old Premium:** | **New Premium:** | **Difference in Premiums:** |
| {tb PlanValues} |  |  |  |

Therefore, enclosed is check number {CheckNumberDollar} to refund the premium(s) withheld in error.

Please cash this check(s) at your earliest convenience.

If you have any questions, please call NDPERS at {stdNDPERSPhoneNumber} or {stdNDPERSTollFreePhoneNumber}.

Sincerely,

NDPERS Accounting Division

Enclosure: Refund Check(s)

{x endif}